## DEPARTMENT OF HEALTH AND FAMILY SERVICES Division of Disability and Elder Services Printed 07/28/2006

## **Provider Inspection Summary**

For the period 06/01/2003 to 05/31/2006 Community Based Residential Facility CLASS CS (SEMIAMBULATORY) STATE OF WISCONSIN
Bureau of Quality Assurance
P.O. Box 2969
Madison WI 53701-2969

## **Facility Information**

Facility Name: LUTHERAN HOME COCHRANE (THE) (510199)

Address: 400 S MAIN ST, COCHRANE, WI 54622

**License Status: REGULAR** 

Licensed/Certified/Registered 07/31/1991

Regional Office: WESTERN REGION (EAU CLAIRE), (715) 836-4752

**Survey History** 

Survey ID: 0093284 End Date: 09/01/2004 Type: ABBREVIATED Purpose: SURVEY

**Results:** NO STATEMENT OF DEFICIENCY ISSUED

Survey ID: 0091108 End Date: 10/03/2003 Type: STANDARD Purpose: SURVEY

**Results:** NO STATEMENT OF DEFICIENCY ISSUED

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